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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/661,903
		Filing Date	09/12/2003
		First Named Inventor	He
		Group Art Unit	2131
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	120-161

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) and letter <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Copies of References Cited - Acknowledgement Postcard
		Remarks	Please charge any deficiency or credit any overpayment to Deposit Account No. 502569.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Lindsay G. McGuinness, Reg. No. 38,549 Steubing McGuinness & Manaras LLP
Signature	
Date	5/5/2005

CERTIFICATE OF MAILING OR FACSIMILE			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 33212 or being facsimile transmitted to the United States Patent and Trademark Office at number (703) 872-9306 on the date below:			
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

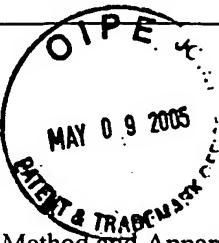
Applicant(s): He

Serial No.: 10/661,903

Filed: September 12, 2003

Title: Scalable, Distributed Method and Apparatus
for Transforming Packets to Enable Secure
Communication Between Two Stations

Attorney Docket No.: 120-161



Group Art Unit: 2131

Examiner:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted before mailing date of first office action on the merits.

Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

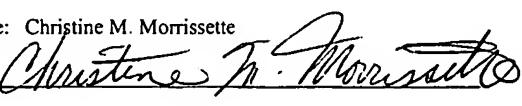
The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

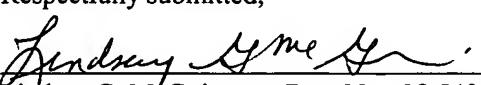
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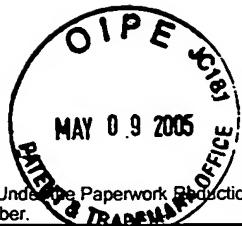
Signature: 

Respectfully submitted,


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Date: 5/5/2005

Telephone No.: 978-264-6664



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Substitute for form 1449B/PTO		<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Application Number	10/661,903
		Filing Date	09/12/2003
		First Named Inventor	He
		Group Art Unit	2131
		Examiner Name	
Sheet	1	of	1
		Attorney Docket Number	120-161

Examiner Signature		Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

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